

IV Hydration Guidelines

I. Introduction/Purpose:

- A. Registered Nurses (RN), Licensed Practice Nurses (LPN), and Advanced Practice Registered Nurses (APRN) are accountable for the provision of safe competent nursing care in all practice settings. This includes but is not limited to various non-traditional practice settings that market wellness promotional services such as “walk-in” or mobile hydration clinics, drip bars, etc.
- B. It is within the scope of practice for the RN and LPN (see [IV Medication Administration by Licensed Practical Nurses Guidelines](#) for additional information regarding LPNs administering IV medications) to administer intravenous fluids (IV hydration), nutrient therapies, and medications as authorized by a valid order prescribed by a physician, Advanced Practice Registered Nurse (APRN), physician assistant (PA), or other licensed health care practitioner with prescriptive authority acting within their legal scope of practice, provided all criteria required in this guideline are met.
- C. Nurses are responsible for verifying and clarifying any orders or treatment regimens that appear inaccurate, non-efficacious, or contraindicated. If a nurse has concerns, they must consult with the appropriate licensed practitioner and inform the ordering provider if the decision is made not to administer the prescribed treatment.

II. RN Role: The RN does not require the on-site presence of a physician, APRN, Physician Assistant (PA), or other licensed health care practitioner to perform the prescribed/ordered IV hydration, nutrient therapies, and medication administration procedures if there is a valid order/prescription and a completed history and physical performed by the health care practitioner. **Standing orders are not an appropriate substitute for the individualized order/prescription and history and physical.** Physicians are required by state regulations to have an established physician/patient relationship which shall include an initial evaluation, prior to treatment, that is either face-to-face or via telemedicine.

III. LPN Role: The LPN participates in the nursing process as assigned and requires supervision by an RN, physician, or dentist. Under appropriate supervision, an LPN may provide nursing services, including the administration of prescribed/ordered IV hydration, nutrient therapies, and medications if there is a valid order/prescription and a completed history and physical performed by the health care

practitioner and they meet the requirements outlined in the following guideline: [IV Medication Administration by Licensed Practical Nurses Guidelines](#). **Standing orders are not an appropriate substitute for the individualized order/prescription and history and physical.** Physicians are required by state regulations to have an established physician/patient relationship which shall include an initial evaluation, prior to treatment, that is either face-to-face or via telemedicine.

IV. Both RN and LPN Role:

- A. The nurse must have an individualized prescription/order for the procedure written by a physician, APRN, PA, or other licensed health care practitioner with prescriptive authority acting within their legal scope of practice and have completed a client evaluation/assessment for procedure appropriateness.
- B. Nurses must have the knowledge, skill, and competency necessary to carry out the administration procedures and client monitoring in a safe manner.
- C. Agencies/businesses shall establish and maintain policies and procedures on-site for the administration of IV hydration, nutrient therapies, medications, and emergency interventions.

V. Notes:

- A. If working in a setting in which clients may independently present for IV hydration, nutrient therapies, or medication administration, the nurse is responsible for ensuring there is an individualized prescription/order from a duly authorized prescriber prior to the administration of any prescriptive or non-prescriptive medication or the implementation of a medical intervention/treatment. Authorized prescribers include physicians, APRNs, PAs, or other licensed health care practitioners with prescriptive authority acting within their legal scope of practice.
- B. **Standing orders are not an appropriate substitute for the individualized order/prescription and history and physical.** Physicians are required by state regulations to have an established physician/patient relationship which shall include an initial evaluation, prior to treatment, that is either face-to-face or via telemedicine.
- C. The RN and LPN shall use the professional judgement required to implement treatments and pharmaceutical regimens prescribed by providers licensed and authorized by State law to prescribe such plans or regimens. The nurse who accepts responsibility for implementing the administration of IV hydration, nutrient therapies, and medications is accountable for:
  - 1. recognizing side effects,
  - 2. recognizing toxic effects,

3. recognizing allergic reactions,
  4. recognizing immediate desired effects,
  5. recognizing unusual and unexpected effects,
  6. recognizing changes in a client's condition that contraindicates continued
  7. administration of the pharmaceutical or treatment regimen,
  8. anticipating those effects that may rapidly endanger a client's life or well-being, and
  9. making judgments and decisions concerning actions to take in the event such effects occur.
- D. The RN and LPN shall practice in compliance with all federal laws and regulations, and all Oklahoma laws and regulations including but not limited to, the Oklahoma Nursing Practice Act and the Oklahoma Pharmacy Act.

VI. Advanced Practice Registered Nurse (APRN) Role:

- A. The client population must be within the scope of practice of the APRN based on their education, national certification, and experience.
- B. The APRN with diagnostic and prescriptive authority shall follow current clinical standards and evidence-based practice.
- C. Documentation should demonstrate:
  1. Review of the medical record/history was conducted, and no contraindications exist.
  2. Initial evaluation was performed prior to treatment including assessment of the client's status.
  3. Diagnosis including evidence-based indication for hydration and/or other prescribed regimens.
  4. Treatment plan with contingency for care beyond the ability of the current practice site.
  5. Client response to prescribed therapy.
  6. Informed consent including risk and benefit.
  7. Client education for pre-procedure, peri-procedure, after care, and follow up.

VII. Regulatory Authority:

59 O.S. §567.3a(2), (3), (4) and (5)

VIII. References:

Oklahoma Board of Nursing, IV Medication Administration by Licensed Practical Nurses Guidelines  
<https://oklahoma.gov/content/dam/ok/en/nursing/documents/IVMed.pdf>

Oklahoma Board of Nursing, Decision-Making Model for Scope of Nursing Practice Decisions: Determining Advanced Practice Registered Nurse, Registered Nurse and Licensed Practical Nurse Scope of Practice Guidelines

<https://oklahoma.gov/content/dam/ok/en/nursing/documents/prac-decmak.pdf>

Oklahoma Board of Medical Licensure and Supervision, Guidelines for Oklahoma Medical Spas & Aesthetic Procedures

[https://www.okmedicalboard.org/download/510/Med\\_Spa\\_Guidelines\\_1.18.24.pdf](https://www.okmedicalboard.org/download/510/Med_Spa_Guidelines_1.18.24.pdf)

Oklahoma Board of Osteopathic Examiners, Policy for Osteopathic Medical Spas

<https://oklahoma.gov/content/dam/ok/en/osboe/documents/policy/OSBOE-P004%20Policy%20for%20Osteopathic%20Medical%20Spas.pdf>

Mississippi Board of Nursing, IV Hydration Position Statement

[https://www.msbn.ms.gov/sites/default/files/IV%20Hydration%20Position%20Statement\\_Oct%202025\\_0.pdf](https://www.msbn.ms.gov/sites/default/files/IV%20Hydration%20Position%20Statement_Oct%202025_0.pdf)

Georgia Board of Nursing, IV Hydration Position Statement

[https://sos.ga.gov/sites/default/files/2024-06/iv\\_hydration\\_position\\_statement\\_04012024.pdf](https://sos.ga.gov/sites/default/files/2024-06/iv_hydration_position_statement_04012024.pdf)

North Carolina Board of Nursing, Administration of Intravenous Fluids (IV Hydration), Nutrient Therapies, and Medications for Hydration, Health, and Wellness Position Statement

<https://www.ncbon.com/sites/default/files/documents/2024-03/ps-iv-hydration-clinics.pdf>